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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 09/754,490			ing Date 04/2001	☐ To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2)								SMALL		OTHER THAN OR SMALL ENTITY		
H	FOR	N	NUMBER FILED		NUMBER EXTRA		T	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		r	N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), (or (m))	N/A		N/A			N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A	
	TAL CLAIMS CFR 1.18(i))		minus 20 =		•		,	<\$ =		ÖR	x s =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		•			(\$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit 35 U	ts of pape 50 (\$125 ional 50 s .S.C. 41(er, the applic for small en sheets or fra a)(1)(G) and	rawings exceed 100 lication size fee due entity) for each raction thereof. See and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL	•	Į	TOTAL	
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT	03/19/2007	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	PRESE LY EXTR			RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18(i))	· 42	Minus	·· 42	= 0		\	(\$ =		OR	X \$50=	0
	Independent (37 CFR 1.16(h))	• 6	Minus	6	= 0		7	(\$ =		OR	X \$200=	0
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		·
	•			•			-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2		n 3)						
AMENDMENT	8/20/09	CLAIMS REMAINING AFTER AMENDMENT		HIGHES' NUMBER PREVIOUS PAID FOI	R PRESE		Ŀ	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))	3	Minus	.40	<u> </u>			(\$ =		OR	X \$ =	
	Independent (37 CFR 1.16(h))	· 11	Minus	6	5		>	('\$ =		OR	30:40	1000
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L EEE		OR	TOTAL ADD'L FEE	1000
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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